

06-24-04

AF/3762

61



# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Gust H. Bardy et al. Confirmation No.: 5571  
 Serial No.: 09/940,266 Examiner: K. Droesch  
 Filing Date: August 27, 2001 Group Art Unit: 3762  
 Docket No.: 1201.1103101 Customer No.: 28075  
 For: BIPHASIC WAVEFORM FORM ANTI-TACHYCARDIA PACING FOR A  
 SUBCUTANEOUS IMPLANTABLE CARDIOVERTER-DEFIBRILLATOR

## TRANSMITTAL SHEET

Mail Stop AF  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

# RECEIVED

## JUN 28 2004

### TECHNOLOGY CENTER R3700

Sir:

**CERTIFICATE UNDER 37 C.F.R. 1.10:** The undersigned hereby certified that this paper or papers, as described herein are being deposited in the United States Postal Service, "Express Mail Post Office to Addressee" having an Express Mail mailing label number of: EV 315614391 US, in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 23rd day of June 2004

By Kathleen L. Boekley  
 Kathleen L. Boekley

We are transmitting herewith the attached:

[XX] Amendment After Final  
 [XX] No additional claim fee required  
 [ ] The claim fee has been calculated as shown:

CLAIMS AS AMENDED							
	(3)	(4)	(5)	SMALL ENTITY		OTHER	
	REMAINING CLAIMS	HIGHEST PAID	EXTRA	RATE	ADD'L FEE	RATE	ADD'L FEE
TOTAL CLAIMS	-	=		X 9=	\$	X 18=	\$
INDEPENDENT CLAIMS	-	=		X 43=	\$	X 86 =	\$
( ) FIRST MULTIPLE DEPENDENT CLAIM				+ 145 =	\$	+ 290 =	\$
TOTAL				\$		\$	

[ ] A check in the amount of \$\_\_\_\_\_ is enclosed. Itemization:

Fee Code \_\_\_\_\_ \$

Fee Code \_\_\_\_\_ \$

Fee Code \_\_\_\_\_ \$

[XX] Small entity status of this application under 37 C.F.R. §§ 1.9 and 1.27 has been established.

[ ] Other: \_\_\_\_\_.

[XX] Return Receipt Postcard (MPEP 503).

[XXXX] Please charge any deficiencies or credit any overpayment in the enclosed fees to Deposit Account No. 50-0413.

By:   
David M. Crompton, Reg. No. 36,772

David M. Crompton  
CROMPTON, SEAGER & TUFTE, LLC  
1221 Nicollet Avenue, Suite 800  
Minneapolis, MN 55403-2420  
Telephone: (612) 677-9050  
Facsimile: (612) 359-9349